

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective November 10, 1998

Application or Docket Number

**CLAIMS AS FILED - PART I**

(Column 1)	(Column 2)	
FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	3 minus 20 = *	
INDEPENDENT CLAIMS	1 minus 3 = *	
MULTIPLE DEPENDENT CLAIM PRESENT		

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE	OTHER THAN SMALL ENTITY		
RATE	FEE	RATE	FEE
	380.00		760.00
X\$ 9=			X\$18=
X39=			X78=
+130=			+260=
TOTAL		TOTAL	160

**CLAIMS AS AMENDED - PART II**

(Column 1)	(Column 2)	(Column 3)	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	** =
Independent	*	Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

SMALL ENTITY	OTHER THAN SMALL ENTITY		
RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X39=		X78=	
+130=		+260=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

**BEST AVAILABLE COPY**

(Column 1)	(Column 2)	(Column 3)	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	** =
Independent	*	Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X39=		X78=	
+130=		+260=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

(Column 1)	(Column 2)	(Column 3)	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	** =
Independent	*	Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X39=		X78=	
+130=		+260=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This Form is for INTERNAL PTO USE ONLY  
It does NOT get mailed to the applicant.

**NOTICE OF FILING / CLAIM FEE(S) DUE  
(CALCULATION SHEET)**

APPLICATION NUMBER: 09/283431

**Total Fee Calculation**

<u>Fee Code</u>	<u>Total # Claims</u>	<u>Number Extra</u>	<u>X</u>	<u>Fee</u>	<u>Fee</u>	=	<u>Total</u>
Basic Filing Fee	<u>201/101</u>						
Total Claims >20	<u>203/103</u>	<u>3</u>	-20 =	<u>/</u>	X		<u>760</u>
Independent Claims >3	<u>202/102</u>	<u>1</u>	-3 =	<u>/</u>	X		
Mult. Dep Claim Present	<u>204/104</u>						
Surcharge	<u>205/105</u>						
English Translation	<u>139</u>						

**TOTAL FEE CALCULATION**

890

Fees due upon filing the application:

Total Filing Fees Due = \$ 890

Less Filing Fees Submitted - \$ 890

BALANCE DUE = \$ 890

Miller  
Office of Initial Patent Examination